TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/402,614
Filing Date	March 1, 2000
First Named Inventor	Gail P. RISBRIDGER
Art Unit	1642
Examiner Name	G. Nickol

Total Number of Pages in This Submission		Attorney Docket Number	229752000800

ENCLOSURES *(Check all that apply)*

[x] Fee Transmittal Form	[ ] Drawing(s)	[ ] After Allowance Communication to TC
[ ] Fee Attached	[ ] Licensing-related Papers	[ ] Appeal Communication to Board of Appeals and Interferences
[ ] Amendment/Reply	[ ] Petition	[x] Appeal Communication to TC **(Appeal Notice, Brief, Reply Brief)**
[ ] After Final	[ ] Petition to Convert to a Provisional Application	[ ] Proprietary Information
[ ] Affidavits/declaration(s)	[ ] Power of Attorney, Revocation Change of Correspondence Address	[ ] Status Letter
[x] Extension of Time Request	[ ] Terminal Disclaimer	[x] Other Enclosure(s) (please Identify below):
[ ] Express Abandonment Request	[ ] Request for Refund	Return Receipt Postcard
[ ] Information Disclosure Statement	[ ] CD, Number of CD(s) _____	
[ ] Certified Copy of Priority Document(s)	[ ] Landscape Table on CD	
[ ] Reply to Missing Parts/ Incomplete Application	**Remarks**	
[ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP
Signature	
Printed name	Jonathan Bockman
Date	June 28, 2005
Reg. No.	45,640

va-121189

FEE TRANSMITTAL
For FY 2005

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

[ ] Applicant claims small entity status. See 37 CFR 1.27

Complete if Known	
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TOTAL AMOUNT OF PAYMENT	($) 1,520.00	Attorney Docket No.	229752000800

METHOD OF PAYMENT (check all that apply)

[ ] Check   [ ] Credit Card   [ ] Money Order   [ ] None   [ ] Other (please identify): _____

[x] Deposit Account   Deposit Account Number: 03-1952   Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

[x] Charge fee(s) indicated below

[ ] Charge fee(s) indicated below, **except for the filing fee**

[x] Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17

[x] Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	FILING FEES Small Entity Fee ($)	SEARCH FEES Fee ($)	SEARCH FEES Small Entity Fee ($)	EXAMINATION FEES Fee ($)	EXAMINATION FEES Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)		Fee Paid ($)
_____ - 20 =	_____	x _____	=	_____

Multiple Dependent Claims Fee ($)	Fee Paid ($)
_____	_____

Indep. Claims	Extra Claims	Fee ($)		Fee Paid ($)
_____ - 3 =	_____	x _____	=	_____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
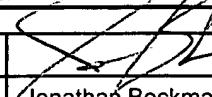
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)		Fee Paid ($)
_____ - 100 =	_____	/50 _____ (round up to a whole number) x	_____	=	_____

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1401 Notice of appeal	500.00
1253 Extension for response within third month	1,020.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	45,640	Telephone	(703) 760-7769
Name (Print/Type)	Jonathan Bockman			Date	June 28, 2005

va-121188